

	PERSC	DNAL FINANC	IAL STATEMENT							
DATE OF FINANCIAL CONDITION:			If I sind O							
Nama (Individual 1)		,	If Joint St	atement						
A 1.1			Name (Individual 2)							
		Address								
Phone				SSN _						
Email	Date of Birth		Email	Date of Birth						
			Relationship to Individual 1							
		PERSONAL INF	ORMATION							
Employer		Eı	mployer (Ind 2)							
Title / Position:		т	itle / Position							
Do you have a will? Yes	No If, yes, wh	o will serve as Ex	ecutor/trix?							
Have you personally, or any business or has one been filed individually aga If yes to bankruptcy, describe		e an officer, princi	ipal or partner ever filed a petition i	n bankruptcy						
Have you ever been convicted of a fe	elony?	Yes No If y	ves, describe							
Are you a defendant in any suits or le	gal actions?	Yes No If y	ves, describe							
Do you have any Tax Claims or Disp	utes	Yes No If y	ves, describe							
Are you an Executive Officer, Directo	r, or Principal Sha	reholder of a banl	k? Yes No If yes, bank	name						
Are you a US Citizen? Yes	No If No, Sta	atus:		<del></del>						
SOURCES OF ANNUAL INCOME			ANNUAL EXPENDITURES							
	INDIVIDUAL 1	INDIVIDUAL 2		INDIVIDUAL 1	INDIVIDUAL 2					
Wages and Salaries			Mortgage/Rent-Residence(s)							
Bonuses, Commissions, etc.			All other Debt Service							
Interest & Dividends		State & Federal Income Taxes								
Rental Income (Net of Expense)			Alimony/Child Support*							
Partnership Draws, Distributions			Tuition							
Other Trust Accts			Insurance							
			Living Expenses							
			Other							
TOTAL CASH INCOME			TOTAL ANNUAL EXPENSES							

# PLEASE COMPLETE THE BELOW SCHEDULES AND THEY WILL POPULATE THE PERSONAL FINANCIAL STATEMENT. You must check the appropriate box for Individual 1, Individual 2 or Joint for the last page to total.

**SCHEDULE 1 – CASH IN BANKS** (includes CD's, Money Markets)

	0	wned By	<i>/</i> :	TYPE OF ACCOUNT		
NAME OF BANK	Ind 1	Ind 2	Joint	(checking, savings, CD, etc.)	BALANCE	PLEDGED?
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
TOTAL						



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<sup>\*</sup>Note: Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for obtaining credit.

#### SCHEDULE 2 - PUBLICLY TRADED INVESTMENTS

	clude stoc	ks, bonds	, ETFs, n	nutual funds – <b>Do NOT include reti</b>	irement funds	)	
NVESTMENT NAME OR INSTITUTION HELD	Ind	Owned E		DESCRIPTION	BAL	ANCE	PLEDGED?
INCTITOTIONTIEED	IIIG	i iiid Z	John	DECOMM HON	D/ (L)	TITOL	☐ Yes ☐ No
							Yes ☐ No
							☐ Yes ☐ No
							☐ Yes ☐ No
TOTAL							
			SCHED	ULE 3 - LIFE INSURANCE			
		ned By:			FACE	CASH	
INSURANCE COMPANY	Ind 1	nd 2 Jo	int	BENEFICIARIES	AMOUNT	VALUE	LOANS
TOTAL							
IOIAL							
				NON-MARKETABLE SECURITIES			
COMPANY / INVESTMENT NAME	Ind	Owned I		DESCRIPTION	BAL	ANCE	PLEDGED?
TV WIL	ma	i iiid Z	John	DECOMM FIGH	טי ובו	WOL.	☐ Yes ☐ No
							☐ Yes ☐ No
							☐ Yes ☐ No
							☐ Yes ☐ No
TOTAL	l		I	L			
		SCH	IFDUI F	5 - RETIREMENT ACCOUNTS			
		Owned I	Зу:				
ACCOUNT TYPE	Ind	1 Ind 2	Joint	DESCRIPTION / FIRM WHERE II	NVESTMENTS	SHELD	BALANCE
TOTAL							
	S			TES AND ACCOUNTS RECEIVAB	LE		
NAME OF DEBTOR	Ind	Owned I		DESCRIPTION	BAL	ANCE	PLEDGED?
							☐ Yes ☐ No
							☐ Yes ☐ No
							☐ Yes ☐ No
							☐ Yes ☐ No



**TOTAL** 

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### **SCHEDULE 8 - REAL ESTATE**

(If partially owned, give total property information, not just your share)

DESCRIPTION & LOCATION	Owned By:			%	DATE		MARKET	MORTGAGE
	Ind 1	Ind 2	Joint	OWNED	ACQUIRED	COST	VALUE	BALANCE

If the above space is not sufficient, additional schedules may be attached.

# **SCHEDULE 9 - OTHER ASSETS**

PERSONAL PROPERTY /	Owned By:		<i>/</i> :		MARKET	
OTHER ASSETS	Ind 1	Ind 2	Joint	DESCRIPTION	VALUE	PLEDGED?
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
TOTAL						

## SCHEDULE 10 - CREDIT CARDS OR UNSECURED NOTES PAYABLE

NAME OF BANK OR	L	iable By			CREDIT	
CREDITOR	Ind 1	Ind 2	Joint	DESCRIPTION	LIMIT	BALANCE
TOTAL						

SCHEDULE 11 - SECURED NOTES PAYABLE (Include any secured, non-real estate loans such as margin loans, etc.)

		Liable By:				
NAME OF BANK OR	Ind 1	Ind 2	Joint		ORIGINAL	
CREDITOR				COLLATERAL	BALANCE	BALANCE
					_	
		1				

SCHEDULE 12 – OTHER LIABILITIES (Include any other liabilities, such as Income Taxes Payable, other direct obligations)

	Liable By:		<b>'</b> :		ORIGINAL	
NAME OF CREDITOR	Ind 1	Ind 2	Joint	PURPOSE	BALANCE	BALANCE

SCHEDULE 13 - CONTINGENT LIABILITIES (This Schedule must be completed. If none, then indicate "none" below.)

	711111111111111111111111111111111111111				protour in morro, unon intuitouto morro isono	,	
		L	iable By	:			
BORROWING ENTITY	NAME OF CREDITOR	Ind 1	Ind 2	Joint	COLLATERAL	BALANCE	

If the above space is not sufficient, additional schedules may be attached.



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PERSONAL FINANCIAL STATEMENT SUMMARY									
ASSETS	SOLELY	OWNED	JOINTLY						
	INDIVIDUAL 1	INDIVIDUAL 2	OWNED	TOTAL					
Cash (includes CD's, Money Markets) (Schedule 1)									
Publicly Traded Investments (Schedule 2)									
Cash Value of Life Insurance (Schedule 3)									
Non-marketable Securities (Schedule 4)									
Retirement Funds (Schedule 5)									
Notes and Accounts Receivable (Schedule 6)									
Personal Residence(s) (Schedule 7)									
Investment Real Estate (Schedule 8)									
Other Assets (Schedule 9)									
TOTAL ASSETS									
LIABILITIES & NET WORTH	SOLELY LIABLE		JOINTLY						
	INDIVIDUAL 1	INDIVIDUAL 2	LIABLE	TOTAL					
Credit Cards and Unsecured Notes Payable (Schedule 10)									
Notes Payable to Banks – Secured (Schedule 11)									
Residence(s) Mortgage Payable (Schedule 7)									
Other Real Estate Mortgages Payable (Schedule 8)									
Other Liabilities (Schedule 12)									
TOTAL LIABILITIES									
NET WORTH									
NET WORTH									
CERTIFICATION: This information and the information provided on the purpose of obtaining or maintaining credit for the Applicant(s) for acknowledge that representation made in this Statement will be relied. This Statement is true and correct in every detail and accurately represented to reditor is authorized to make all inquiries deemed necessary to the creditworthiness of the undersigned. Applicant(s) will promptly not of this Statement. Creditor is further authorized to answer any question declares that he/she has read and understands the statements above	the purpose of Ap I on by Tandem Ba resents the financi- verify the accuracy ify Creditor of any s ns about Creditor's	plicant(s) guarantee ink (the "Creditor") in al condition of the A of the information of subsequent changes	e of credit for other in its decision to gra pplicant(s) on the ontained herein ar s which would affe	rs. Applicant(s) ant such credit. date provided. nd to determine ct the accuracy					

DATE



SIGNATURE

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SIGNATURE (Other party if joint credit request)

DATE